PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE OR			OTHER THAN		
Γ _Τ	OTAL CLAIMS		(Column 1)		(Colu	(Column 2)		TYPE [SMALL ENTITY	
TOTAL CLAIMS			G					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ / / / / / / / / / / / / / / / / / /		*			X\$ 9=		OR	X\$18=	f	
INDEPENDENT CLAIMS			3 minus 3 =		*			X43=	ì	OR	X86=		
ΜL	JLTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=		
* If the difference in column 1 is less th				ero, enter	"0" in c	olumn 2	į	TOTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II									<u> </u>	•	OTHER	THAN	
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CL AINA	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
		A	DDIT. FEE			ADDII. FEE							
_		(Column 1) CLAIMS		(Colum	EST	(Column 3)	lг		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDENT	CLAIM	<u>. [_] </u>	╏	+145=		OR	+290=		
								TOTAL		OR L	TOTAL		
		Α	DDIT. FEE L		,	ADDIT. FEE							
	\	(Column 1) CLAIMS		(Colum HIGHE		(Column 3)	l –		1001			4.5.5.	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=		X43=			X86=		
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	f the "Highest Nur	mber Previously Pa	id For" IN THIS	S SPACE is	less than	20, enter "20."	A[TOTAL DDIT. FEE		OR A	TOTAL ODIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in colu	ımn 1.		